


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A98000001889	
1. Entity Name TEMPUS RESORTS REALTY, LTD.	

FILED
2003 MAY -8 AM 11:25

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business 7380 SAND LAKE ROAD, STE. 600 ORLANDO FL 32819	Mailing Address 7380 SAND LAKE ROAD, STE. 600 ORLANDO FL 32819
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DUE BY MAY 1, 2003	
4. FEI Number 59-3535539	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$18,693,768.00	10. Amount of Capital Contributions in FLORIDA to date. 28,691,833	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	199000009242	STREET ADDRESS	
NAME	TPI HOLDINGS, LLC	CITY-ST-ZIP	
STREET ADDRESS	7380 SAND LAKE ROAD, STE. 600		
CITY-ST-ZIP	ORLANDO FL 32819		
DOCUMENT #		STREET ADDRESS	500018471315
NAME		CITY-ST-ZIP	05/18/03-0005-017 **535.00
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: 	4-16-03	407-226-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER ROGER FARWELL		

CR2E003 (10/02)

STAPLE CHECK HERE